

0626LPA (2014/12)

RELOCATION ELIGIBILITY NOTICE

DISPLACEE: \_\_\_\_\_

Based on information as of \_\_\_\_\_, you are eligible for the following benefits as indicated. You will NOT be required to move before\_\_\_\_\_.

NON-RESIDENTIAL			
BUSINESS, FARM, NON-PROFIT			
MOVING EXPENSES PLUS RE-ESTABLISHMENT EXPENSES		\$ TO BE DETERMINED	
OR			
FIXED PAYMENT		\$ TO BE DETERMINED	
RESIDENTIAL			
HOUSING SUPPLEMENT			
LISTING PRICE OF COMPARABLE DWELLING		\$	
LESS ACQUISITION PRICE (125% of fair market value)		\$	
		=	
MAXIMUM HOUSING SUPPLEMENT		\$	
RENTAL SUPPLEMENT/PURCHASE DOWN PAYMENT			
a) COMPARABLE RENT + UTILITIES		\$	per month x 42 mo's
b) LESS ACTUAL/ECONOMIC RENT + UTILITIES			
OR 30% OF MONTHLY INCOME		\$	per month x 42 mo's
c) RENTAL SUPPLEMENT ("a" minus "b")		\$	
OR			
d) PURCHASE DOWN PAYMENT (greater of "c" or \$7,200)		\$	
MOVING EXPENSES			
SELF MOVE - FIXED COST		\$	
OR			
COMMERCIAL MOVE		\$ TO BE DETERMINED	
COMPARABLE HOUSING		COMPARABLE RENTALS	
Sale Address	Bedrooms	Rental Address	Bedrooms
Claim must be filed within the prescribed time limits as noted on claim form 0677LPA or 0679LPA. Claims can not be paid until all the conditions on the claim form have been met. You may file your appeal at any time up to 6 months after you have received this notice.			
SEE RELOCATION BOOKLET FOR COMPLETE DESCRIPTION OF THE RELOCATION PROGRAM			
ACQUISITION AGENT	ACQUISITION AGENT SIGNATURE	DATE	
AGENCY	ADDRESS	PHONE	
	JOB NO.	PARCEL	NAME